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I hereby certify that this correspondence is being deposited via facsimile to The Honorable Commissioner in the United States Patent and Trademark Office, Attention: Gail K. Verbitsky whose telephone number is (571) 272-2253 and centralized facsimile number is (571) 273-8300 on July 25, 2005.


David H. Brinkman, Reg. No. 40,532

7/25/05
Date

Free only
PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s): Jacob Fraden
Serial No.: 10/612,112
Filed: July 2, 2003
Confirmation No.: 3389
Group Art Unit: 2859
Examiner: Verbitsky, Gail K.
Title: PROBE FOR A BODY CAVITY
Atty Docket: AMCN-06

Cincinnati, Ohio 45202

July 25, 2005

Mail Stop AF
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AFTER FINAL AMENDMENT

Sir:

In response to the final Office Action mailed on May 24, 2005, please amend the above-identified application as follows:

Amendments to the Specification begin on page 2 of this paper.

Amendments to the Claims are reflected in the listing of claims which begins on page 3 of this paper.

Remarks/Arguments begin on page 9 of this paper.

Page 1 of 12

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01 FC:1201 200.00 DA
02 FC:1202 50.00 DA

Extension (months)	Fee for other than small entity	Fee for small entity
one month	\$ 120.00	\$ 80.00
two months	\$ 450.00	\$225.00
three months	\$1,020.00	\$510.00
four months	\$1,590.00	\$795.00

— Attached is a check in the amount of \$___ for the three month extension fee as required by 37 C.F.R. § 1.17(c).

If an additional extension of time is required, please consider this a petition therefor.

(Check and complete the next item, if applicable)

— An extension for ___ months has already been secured and the fee paid thereof of \$___ is deducted from the total fee due for the total months of extension now requested. Extension fee due with this request \$___.


OR

(b) XX Applicant believes that no extension of time is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition for extension of time.

XX If any additional fee for claims or extension of time is required, charge Account No. 23-3000. A duplicate of this transmittal is attached.

Respectfully submitted,

WOOD, HERRON & EVANS, L.L.P.


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Page 3 of 3